

Please type a plus sign (+) inside this box PTO/SB/21 (6-99)Approved for use through 09/30/2000. OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

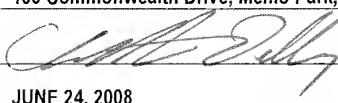
(to be used for all correspondence after initial filing)

		Application Number	10/006,856
		Filing Date	December 6, 2001
		First Named Inventor	BAKER, et al.
		Group/Art Unit	1636
		Examiner Name	VOGEL, Nancy S.
Total Number of Pages in This Submission		Attorney Docket Number	GNE-2730-P1C14

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Copy of Assignment	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Amendment Under 37 CFR §1.48(b)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> APPEAL COMMUNICATION TO GROUP (APPEAL NOTICE, BRIEF, REPLY BRIEF)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Version With Markings Showing Changes	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, by Assignee to Exclusion of Inventor Under 37 C.F.R. §3.71 With Revocation of Prior Powers	<input type="checkbox"/> Additional Enclosure(s) (Please Identify Below):
<input checked="" type="checkbox"/> Extension of Time Request – 2 months	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/>
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	<input type="checkbox"/>
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	<input type="checkbox"/>
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	
<input type="checkbox"/> Copy of Notice	AUTHORIZATION TO CHARGE DEPOSIT ACCOUNT <u>07-1700</u> FOR ANY FEES DUE IN CONNECTION WITH THIS PAPER, REFERENCING ATTORNEY'S DOCKET NO. 123851-181898 (GNE-2730-P1C14).	

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm or Individual name	GOODWIN PROCTER LLP 135 Commonwealth Drive, Menlo Park, CA 94025	CHRISTOPHER DE VRY, Ph.D. (Reg. No. 61,425) Telephone: (650) 752-3100 Facsimile: (650) 853-1038
Signature		
Date	JUNE 24, 2008	Customer Number: 77845

FILED VIA EFS - ON JUNE 24, 2008



BY: ARLETTE MALHAS

LIBC/3326905.1

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop , Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.